Rockingham Youth Centre **Membership Form**



Rockingham Youth Centre Memberships are for young people aged 12-24.

Membership is free and allows you to book into programs and workshops each school term and school holidays.

Please note all fields are required to be completed.

Member details:

First Name:	Surname:	
Preferred/Chosen name:	Date of birth:	
Gender identity:	Personal pronouns:	
Address:	Email:	
Suburb:	Postcode:	
Contact number:	Cultural identity:	
Member information:		
Are there any medical or physical conditions that need to be brought to the attention of the Centre staff? (allergies, food allergies, asthma etc)		
Yes	No	
If yes, please list:		
Please note: Staff cannot provide level of care beyond basic supervision. Staff do not administer medications or assist with medical issues. If a young person has specific needs, a support worker must be provided.		
Young person's declaration		
I understand that the City of Rockingham Youth Centre aims to create a safe place for all young people. I have read and understood the Rockingham Youth Centre guidelines and consequences and agree to abide by them. I agree to treat all staff, other young people and property with respect.		
Young person's signature:	Date:	
How did you hear about the Rockingham Youth Centre?		
Please tick any programs/workshops you are interested in attending or receiving information about:		
Social activities Art Cooking Gaming Music Life skills Employment		

Information for young person and/or parent/guardian to read and sign

Parent/guardian details (or emergency contact details if over 18 years of age)

First Name:	Surname:	Surname: Address:	
Relationship to young person:	Address:		
Suburb:	Postcode:		
Phone:	Email:		
Second emergency contact			
First Name:	Surname:		
Relationship to young person:	Address:		
Suburb:	Postcode:		
Phone:	Email:		
Young person and/or parent/guardian	agreement		
The City of Rockingham Youth Centre aims to all they can to make sure all young people and I understand that if I/my young person is invo emergency and/or ambulance services may be service, treatment and/or transport. I understand regulations in place, I/they may be remove not hold the authority to keep young person Rockingham does not take responsibility for young person that may occur whilst attending the Rockingham does that the City of Rockingham does not take responsibility for young person that may occur whilst attending the Rockingham does not take responsibility for young person that may occur whilst attending the Rockingham does not take responsibility for young person that may occur whilst attending the Rockingham does not responsible to the Rockingham does not take responsibility for young person that may occur whilst attending the Rockingham does not take the City of Rocking	e safe while attending our pre lived in a medical emergency (e e requested and I agree to me and that if I/my young person yed from programs. I understal is at the Centre at the request young people who leave the Youngham will not be liable for I	mises and participating in programs. determined by the Centre staff), et any expenses incurred for that does not abide by the responsibilities and that the City of Rockingham does of parents/guardians. The City of outh Centre or who are not on the oss, damage or injury to property or	
Photo consent			
The City of Rockingham may take photos a person may be included in photos that are publications, the City of Rockingham webs Do you give permission for the City of Rock stated above?	used for reasonable promoticite, social media accounts or	onal purposes. This may include for internal presentations.	
Yes, I DO give permission.	No, I DO N	IOT give permission.	
Young person or parent/guardian name:	Signature:	Date:	



Rockingham Youth Centre

(08) 9591 0836



20 Mackinnon St, Rockingham WA 6168



City of Rockingham Administration



Civic Boulevard,



Rockingham WA 6168

(08) 9528 0333



youthcentre@rockingham.wa.gov.au



customer@rockingham.wa.gov.au